

CLAIMS ONLY							SERIAL NO. _____		FILING DATE _____	
							APPLICANT(S) _____			
							CLAIMS			
		AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				
		IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	
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TOTAL IND.	3		↓			↓			↓	
TOTAL DEP.	17	↔		↔			↔		↔	
TOTAL CLAIMS	20.									
* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS										